

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H130001431363)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

fax Number : (850)617-6383

From:

Account name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305)634-3694

Fax Number

: (305)633-9696

Enter the email address for this business entity to be used for futute annual report mailings. Enter only one email address please.

JUN 24 PH 3

FLORIDA LIMITED LIABILITY CO. MADELEYNE DESIGNS, LLC

Certificate of Status	0
Certified Copy	
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe PAGE 01/03

EWBIKE COKE

3696889908



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

The Name of the Limited Liability Company shall be:

MADELEYNE DESIGNS, LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the at.

<u>ARTICLE III</u>

The mailing address and street address of the principal office of the limited liability company is:

1719 TERRA COTTA DRIVE RIVIERA BEACH, FL 33404

ARTICLE IV

The Company shall commence business on: JUNE 21ST 2013.

ARTICLE V

The name and the Florida street address of the registered agent:

MADELEYNE R. TORNEL 1719 TERRA COTTA DRIVE RIVIERA BEACH, FL 33404

ARTICLE VI

The name of the Managing Member (s) shall be:

MADELEYNE R. TORNEL 1719 TERRA COTTA DRIVE RIVIERA BEACH, FL 33404

H 13000143136

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPESENTATIVE

MADELEYNE DESIGNS LLC

(Name of Company)

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent
ADELEYNE R. TORNEL

Print Name

Signature of a member of a member,

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MADELEYNE R. TORNEL

Typed or printed name of signee

H13000143136